

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Dental Association Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Responsibility and Freedom Work PAC	<b>Transaction ID:</b> 8100658 <b>Date of Disbursement</b>
Mailing Address P. O. Box 1281	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 9 / 2 0 0 9</div> </div>
City State Zip Code Tupelo MS 38802	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Check delivered by Kathleen Ford for event 7/29/09	<div>1500.00</div>
Candidate Name Responsibility and Freedom Work PAC	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Check delivered by Kathleen Ford for event 7/29/09
<b>B.</b> Full Name (Last, First, Middle Initial) Capps For Congress	<b>Transaction ID:</b> 8100659 <b>Date of Disbursement</b>
Mailing Address 301 E. Carrillo Street, Suite A	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 9 / 2 0 0 9</div> </div>
City State Zip Code Santa Barbara CA 93101	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Check delivered by Kathleen Ford	<div>1000.00</div>
Candidate Name Lois Capps	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 23	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Check delivered by Kathleen Ford
<b>C.</b> Full Name (Last, First, Middle Initial) Friends Of Chris Dodd	<b>Transaction ID:</b> 8101245 <b>Date of Disbursement</b>
Mailing Address PO Box 270701	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 9</div> </div>
City State Zip Code West Hartford CT 06127	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Check sent to Jim Williams for event 8/8/09	<div>5000.00</div>
Candidate Name Sen. Christopher J. Dodd	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District:	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Check sent to Jim Williams for event 8/8/09

**SUBTOTAL** of Disbursements This Page (optional) .....

7500.00

**TOTAL** This Period (last page this line number only) .....